



APPLICATION FOR PERMIT
TO APPROPRIATE PUBLIC WATERS OF THE STATE OF WASHINGTON
I have examined this application as required by SEPA and find that it is: ☐ not an "action" ☒ categorically exempt.

☐ SURFACE WATER

☒ GROUND WATER

\$10.00 MINIMUM STATUTORY EXAMINATION FEE REQUIRED WITH APPLICATION
(GRAY BOXES FOR OFFICE USE ONLY)

6/23/89
DATE

SIGNATURE

APPLICATION NO. Q125459	W.R.I.A. 10	COUNTY King	PRIORITY DATE 6/22/89	TIME	ACCEPTED <i>[initials]</i>
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APPLICANT'S NAME - PLEASE PRINT

FEDERAL WAY WATER AND SEWER DISTRICT

Bus. Tel. **941-1516**

Home Tel.

Other Tel. **927 2922**

ADDRESS (STREET) **31627 1st Ave South** (CITY) **FEDERAL WAY** (STATE) **Wa.** (ZIP CODE) **98063**

DATE & PLACE OF INCORPORATION IF APPLICANT IS A CORPORATION

1. SOURCE OF SUPPLY	
IF SURFACE WATER	IF GROUND WATER
SOURCE (NAME OF STREAM, LAKE, SPRING, ETC.) (IF UNNAMED, SO STATE)	SOURCE (WELL, TUNNEL, INFILTRATION TRENCH, ETC.) WELL # 26
TRIBUTARY	SIZE AND DEPTH 20" x 1000 ft.

2. USE	
USE TO WHICH WATER IS TO BE APPLIED (DOMESTIC SUPPLY, IRRIGATION, MINING, MANUFACTURING, ETC.) Municipal supply	
ENTER QUANTITY OF WATER REQUESTED USING UNITS OF:	CUBIC FEET PER SECOND (CFS) OR GALLONS PER MINUTE (GPM) 2000 600 PER ACRE FEET PER YEAR 3326
TIMES DURING YEAR WATER WILL BE REQUIRED Continuously	

per phone call
w/ Ber + Ross
11/31/92
TG

IF IRRIGATION, NUMBER OF ACRES	IF DOMESTIC USE, NUMBER OF UNITS BY TYPE, E.G. 1-HOME, 1-MOBILE HOME, 2-CAMPSITES, ETC.	IF MUNICIPAL USE, ESTIMATED POPULATION 20 YEARS FROM TODAY
DATE PROJECT WAS OR WILL BE STARTED JUNE 1989	DATE PROJECT WAS OR WILL BE COMPLETED 1991, MAY	

3. LOCATION OF POINT OF DIVERSION/WITHDRAWAL					
3A. IF IN PLATTED PROPERTY					
LOT	BLOCK	OF (GIVE NAME OF PLAT OR ADDITION)	SECTION	TOWN	RANGE

ALSO, PLEASE ENCLOSE A COPY OF THE PLAT AND MARK THE POINT(S) OF WITHDRAWAL OR DIVERSION

3B. IF NOT IN PLATTED PROPERTY					
ON ACCOMPANYING SECTION MAPS, ACCURATELY MARK AND IDENTIFY EACH POINT OF DIVERSION. SHOW NORTH-SOUTH AND EAST-WEST DISTANCES FROM NEAREST SECTION CORNER OR PROPERTY CORNER.					
ALSO, ENTER BELOW THE DISTANCES FROM THE NEAREST SECTION OR PROPERTY CORNER TO THE DIVERSION OR WITHDRAWAL.					
LOCATED WITHIN (SMALLEST LEGAL SUBDIVISION)	SECTION	TOWNSHIP N.	RANGE (E. OR W.) W.M.	COUNTY	
N 325' OF W 1/2 of SW 1/4 of SE 1/4 of	24	21 N	3E	KING	
W 1/2 SW 1/4 SE 1/4					

4. DO YOU OWN THE LAND ON WHICH THIS SOURCE IS LOCATED. IF NOT, INSERT NAME & ADDRESS OF OWNER

5. LEGAL DESCRIPTION OF PROPERTY ON WHICH WATER IS TO BE USED	
ATTACH A COPY OF THE LEGAL DESCRIPTION OF THE PROPERTY (ON WHICH THE WATER WILL BE USED) TAKEN FROM A REAL ESTATE CONTRACT, PROPERTY DEED OR TITLE INSURANCE POLICY. OR, COPY CAREFULLY IN THE SPACE BELOW.	

FEDERAL WAY Water and Sewer District service area

RECEIVED
JUN 22 1989

DEPARTMENT OF ECOLOGY
NORTHWEST REGION

APPLICATION

WHAT IS YOUR INTEREST IN THE PROPERTY ON WHICH THE WATER IS TO BE USED (PROPERTY OWNER, LESSEE, CONTRACTOR, PURCHASER, ETC.)

Public purveyor

ARE THERE ANY EXISTING WATER RIGHTS RELATED TO THE LAND ON WHICH THE WATER IS TO BE USED (INCLUDING WATER PROVIDED BY IRRIGATION DISTRICTS OR DITCH COMPANIES.)

☒ YES

☐ NO

IF YES, FROM WHAT SOURCE (I.E. SURFACE OR GROUND WATER) AND UNDER WHAT AUTHORITY

Rights of record Department of Ecology

6.

DESCRIPTION OF SYSTEM PROPOSED OR INSTALLED

(FOR EXAMPLE: SIZE OF PUMP, CAPACITY OF PUMP, PUMP MOTOR HORSE POWER, PIPE DIAMETER, NUMBER OF SPRINKLERS, ETC.)

to be determined

REMARKS

7.

IF 10 ACRE-FEET OR MORE OF WATER IS TO BE STORED AND/OR IF THE WATER DEPTH WILL BE 10 FEET OR MORE AT THE DEEPEST POINT, A STORAGE PERMIT MUST BE FILED IN ADDITION TO THIS PERMIT. THESE FORMS CAN BE SECURED, TOGETHER WITH INSTRUCTIONS, FROM THE DEPARTMENT OF ECOLOGY.

SIGNATURES

Caroline D. Meyer, Acting General Manager
APPLICANT'S SIGNATURE

Federal Way Water & Sewer

LEGAL LANDOWNERS NAME
(PLEASE PRINT)

By: *Caroline D. Meyer, Acting General Mgr*

Federal Way Water and Sewer

LEGAL LANDOWNER'S SIGNATURE (OWNER OF PROPERTY
DESCRIBED IN ITEM NUMBER 5)

P.O. Box 4249 Federal Way, WA 98063

LEGAL LANDOWNER'S ADDRESS

FOR OFFICE USE ONLY

STATE OF WASHINGTON

DEPARTMENT OF ECOLOGY

SS.

This is to certify that I have examined this application together with the accompanying maps and data, and am returning it for correction or completion as follows:

In order to retain its priority date, this application must be returned to the Department of Ecology, with corrections, on or before, 19.....

Witness my hand this.....day of....., 19.....